

If you read the papers or catch the news, you know that the state is facing a budget shortfall of more than \$2 billion in the upcoming biennium. The first two major steps in the budget making process for the new biennium have now happened. The Department of Social and Health Services (DSHS) submitted its Fiscal Year (FY) 2003 - 2005 budget in September and included the Division of Alcohol and Substance Abuse's (DASA) budget at \$241.4 million. Then in mid-December, the Governor announced his budget request and set DASA's budget at \$230.6 million. These budgets compare to our FY 2001 - 2003 budget at \$231.3.

The DSHS budget requested funding to maintain all current program levels, except for

DASA's Budget for the New Biennium

By Ken Stark, Director; and Corki Hirsch, Chief Financial Officer

between the current budget and the new budget is the Criminal Justice Treatment Accounting funding that comes from SB 2338 changes in sentencing.

The Governor's budget eliminated Treatment Accountability for Safer Communities (TASC), the Gravely Disabled Projects, and rural hospital detoxification services. The Governor's budget did add the Criminal Justice Treatment Account funding but revised the level of funding based on the latest savings estimates from sentencing reform.

You will remember that in FY 2003, DASA took nearly \$4.2 million of program reductions in TASC, the Gravely Disabled Projects, and Temporary Assistance to Needy Families (TANF) funding from the Economic Services Administration. Additionally, DASA made nearly \$.5 million of reductions in their administrative costs through staffing cuts. These have all carried forward into the FY 2003 - 2005 Biennial Budget.

Governor Gary Locke has said that his initial budget recommendation is a Book 1 budget – meaning it does not assume any new taxes – and that it is in balance. To help him develop his budget, Governor Locke employed a new budget strategy that he is calling “Priorities of Government” to identify the top priorities and focus spending to get the highest return on investment in those priority areas. According to the Governor, he expects this new approach to result in a FY 2003 - 2005 budget that pays for a clear set of results and focuses on services that matter most in achieving those goals.

The next round of budgets will come from the Senate and the House. We know that they are working on their budgets because we are beginning to get questions about both the agency request and the Governor's request budget.

If you would like more information, please call Corki Hirsch at (360) 438-8088 or e-mail at hirsccc@dshs.wa.gov.

Problem
Gambling.
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InSide FOCUS

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Prevention and Treatment Resources

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Chemical Dependency Professionals:
<http://www.cdpcertification.org/default.asp>

Alcohol/Drug 24-Hour Helpline:
1-800-562-1240
www.adhl.org

Alcohol/Drug Prevention Clearinghouse:
1-800-662-9111
<http://clearinghouse.adhl.org>

Media Literacy:
www.teenhealthandthemedias.net

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*From
the
Director*

A Final Salute to the Cedar Hills Addiction Treatment Center

By Ken Stark

As many of you know the Cedar Hills Addiction Treatment Center officially closed its doors to patient care on October 31, 2002. I am taking this time to publicly acknowledge all of the Cedar Hill's employees, and the King County Mental Health, Chemical Abuse and Dependency Services Division, for thirty-five years of service to chemically dependent individuals and their families in Washington State.

The staff members of the Cedar Hills Treatment Center have touched the lives of over 50,000 men and women who needed treatment and support ser-

vices. Staff members provided hope, encouragement, and counseling to the many individuals who had nowhere else to turn for help.

The center rose to the challenge of serving consumers with multiple complications that at times, seemed insurmountable. They persevered even though they faced limited resources. The Cedar Hill's staff are a testament to numerous individuals who gave credit to Cedar Hills Treatment Center for their sobriety, reunification with their families, and a productive and meaningful life since treatment. 🐾

Stephen Bogan Recognized for Work on Problem Gambling

In November the Washington State Council on Problem Gambling (WSPG) presented a Distinguished Service Award for 2002 to Stephen Bogan, Division of Alcohol and Substance Abuse (DASA) Gambling Treatment Lead. The award recognized "his outstanding work to expand services to problem gamblers and their families throughout Washington State." In receiving his award, Stephen thanked the many staff at DASA who assisted in getting the gambling contract up and running in so short a time. He also acknowledged the following for all their hard work: Gary Hanson, WSPG Director; the WSPG Board; and Dan Bissonnette, contract administrator for WSPG. Stephen noted that what was most rewarding was that right before receiving his award, one of the treatment providers told him they had seen their first problem gambling client. With a waiting list of over 150 people requesting treatment, this first step is very exciting. 🐾



WSPG 2002 Distinguished Service
Award Winner Stephen Bogan

Oxford House World Convention

*By Myrna Brown, Convention Chairperson and
Ruth Leonard, Region 6 Treatment Manager*

On October 10, 2002, Oxford Inc., Washington State Oxford Houses, the Division of Alcohol and Substance Abuse (DASA), and local treatment centers co-sponsored the Oxford House World Convention.

More than 400 Oxford members, alumni, and guests from around the world enjoyed three days of educational segments, entertainment, and fellowship at the Oxford House Annual World Convention in Bellevue, Washington. In addition to the World Convention, the Washington State Oxford members were celebrating the opening of its 100th Oxford House.

Paul Molloy, Oxford House, Inc. Chief Executive Officer; Emilio Vela, Treatment Supervisor at DASA; Jim Brown, World Council Chairman; James McClain, National Board of Directors; and Father Tom Bigelow opened the session Friday morning with a welcome, overview of the weekend events, and a prayer for a successful event. There were a variety of breakout sessions offering an excellent opportunity to discuss many important issues and concerns such as; dual diagnosis, housing for women and children, the operations of the Oxford House system, the law, veterans issues, involvement by the state, (seven state drug and alcohol agencies attended), and a two year study by DePaul University.

Other events at the convention included awards to the houses and chapters; the new Reggie Midget award presented to Greg Van Wyke from Oklahoma; and attendees were honored to hear from John Walters, the Director of the White House Office of National Drug Control Policy.

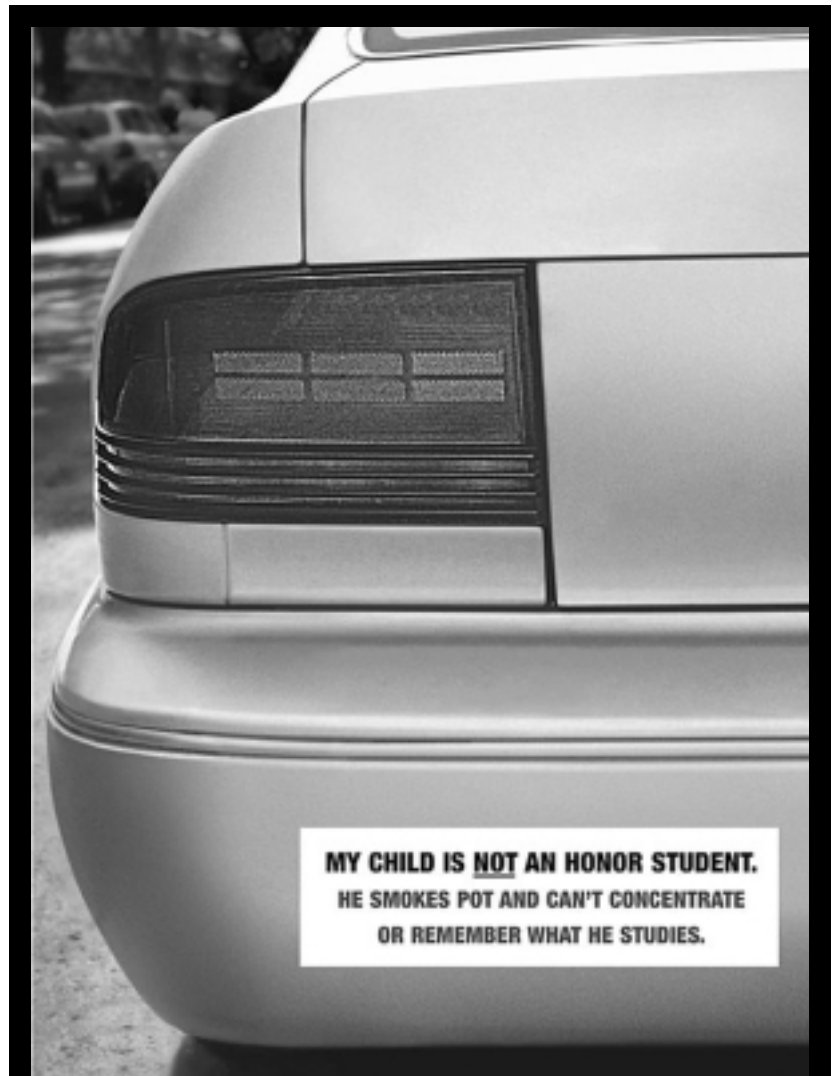
This convention demonstrated the strength of the 900 plus Oxford Houses and 8,000 individuals currently living and following the concepts of the Ox-



ford House philosophy. Washington State, again, established its prominence in the field of recovery in hosting this World Convention, which was declared by many as the best convention ever.



From left to right: John Walters, ONDCP
Director; Oid Mattox, Longtime Oxford House
Member; Brian Saks, World Council Chair



There are lots of reasons kids don't do well in school, and the fact is marijuana could be one of them. Today, pot is stronger and could be more harmful to kids than ever. It can affect grades by impairing concentration and short-term memory. And more teens enter treatment for marijuana abuse than for all other illicit drugs combined. For further information, visit theantidrug.com or call 1-800-788-2800 for a free brochure.

PARENTS.
THE ANTI-DRUG.

Lucy's Story

By Kathy Ketcham

How do you explain, in 800 words or less, how a life can be turned around, how despair is transformed into hope, resentment into forgiveness, self-loathing into self-acceptance?

How can mere words depict the miracle of Lucy Mendoza? They can't, of course, but I'll tell the story — the short version — and hope that some of the wonder will shine through.

Seven years ago, when Lucy was 11, she used marijuana for the first time. "It was fun," she remembers. "I thought I looked cool, and I felt grown up."

In 6th grade Lucy started drinking. Sometimes she'd take alcohol to school, mixing it in her juice bottle.

In high school, Lucy started smoking marijuana regularly — during her lunch break, in baseball dugouts and empty fields, and at parties with friends.

She used a lot that year, and she used even more her sophomore year. At times feelings of hopelessness and despair overwhelmed her.

"I felt so sad," Lucy remembers. "The worse I felt, the more I used drugs. The more I used, the worse I felt."

Spring semester of her sophomore year Lucy got four Fs in her academic subjects. She also got

arrested on a minor-in-consumption charge. Her blood alcohol content (BAC) was .29 — the point where most people are staggering and out of control.

"I didn't act or feel drunk," Lucy recalls. She had no idea that her high tolerance for alcohol was a sign of physical addiction.

Lucy's BAC was so high that her probation officer referred her to Lourdes Counseling Center. She started outpatient classes but after a few weeks, she was drinking again. That's when she became seriously depressed.

"I was drinking a lot and sleeping or crying all the time," Lucy recalls. "People kept telling me I was an addict, but I thought I was just depressed and needed to take more drugs so I wouldn't feel so sad."

She began taking pills, sometimes by the handful — aspirin, benadryl, prescription drugs, anything she could find.

Was she suicidal? "I don't know if I wanted to die," Lucy says. "I wanted attention. I wanted people to know I was hurting."

Frantic with worry, Lucy's mother called a doctor who recommended psychiatric help. After a week in the hospital ("they realized I had a drug problem not a psychiatric problem"), Lucy began a 52-day stay at Sundown M Ranch in Selah.

But Lucy still didn't believe she was an addict. "I thought I could stop if I wanted to," she recalls. "I just didn't want to."

In her second week at Sundown, Lucy was telling her story to her therapy group when several

teenagers confronted her.

"Have drugs completely taken all the shame from you?" they asked her. "You talk about your mother's feelings, and you act like you could care less. Where's your emotion? Do you even care about what you've done to the people who love you?"

That was the epiphany — the moment of enlightenment — when Lucy finally saw what drugs were doing to her life. "It was as if God came crashing into my hopeless life," she remembers. "I broke down and started crying. And I promised myself that I would never use drugs again."

Lucy has kept her promise. She's been sober now for 24 months.

"The first year was hell," she admits. She had to give up her old friends because they all used drugs. She made new friends, got a part-time job, joined the band, and studied hard. Her grades steadily rose, along with her self-respect.

"I'm a good person," she says, simply, humbly. "I make mistakes, but I have a good heart, and I know the number one thing I have to do every day is stay clean. Then, everything else will happen for me — work, school, and life. I just need to stay clean."

To help herself stay clean, Lucy volunteers at the Juvenile Justice Center, talking to kids who are in trouble with drugs. She shares her story and answers their questions. "I do not want to forget who I am," she says.

Last June Lucy graduated from Walla Walla High School. In the fall she started attending Central Washington University. She plans to become a chemical dependency counselor. Someday she hopes to work at Sundown.

"I want to give back to others what was freely given to me," she says.

Most miracles start small. Maybe we don't even notice them, at first, or we hold our breath, fearing that the miracle will disappear, a celestial comet burning out in the atmosphere of real life.

But sometimes the wonder keeps growing, eventually moving beyond "you" and "me" to light up the world itself.

When miracles like Lucy Mendoza start spreading their wings, there's no stopping them.

Kathy Ketcham writes "Straight Talk" for the Walla Walla Union Bulletin, where this article first appeared.

2002 Trends Report is Available Online

The Alcohol, Tobacco and Other Drug Abuse Trends in Washington State 2002 Report is now available on DASA's website. Go to www1.dshs.wa.gov/dasa and click on "What's New".

The report contains information about the economic costs of substance abuse, substance abuse prevalence and trends, impacts of substance abuse, the effectiveness of prevention and treatment, and policy issues confronting the state. Printed copies of the report may be ordered by contacting the Washington State Alcohol/Drug Clearinghouse by e-mail at clearinghouse@adhl.org or by phone at (800) 662-9111 toll free (from within Washington State) or (206) 725-9696 (from Seattle or out of state).



DASA's Statewide Client Satisfaction Survey Wins Governor's Award for Customer Service

*By Felix Rodriguez, Ph.D.,
DASA Research and Evaluation*

The team that created the Division of Alcohol and Substance Abuse (DASA)'s client satisfaction survey recently received the Governor's Award for Customer Service.

Governor Gary Locke presented the award to Felix Rodriguez, team lead, at an award ceremony in November 2002. He recognized the DASA Client Satisfaction Survey for having produced measurable and sustainable results in the area of customer service.

The survey is administered every year during the last full week in March. Each provider who participates receives a confidential report summarizing responses for their own treatment center. Since the report is standardized, providers can compare their own results from year to year. They can also compare their own results to statewide averages.


DASA invites all substance abuse treatment agencies in Washington State to participate in the next Statewide Client Satisfaction Survey, which will take place during the week of March 24-28, 2003. There is no charge for participation. This survey is a great opportunity for



From left to right, front row: Tonja McDougall, Governor Gary Locke, Felix Rodriguez, Fritz Wrede, Beverly Smith. Back row: Vince Collins, Dennis Malmer, Ken Stark, Toni Krupski. Not shown: Kevin (Buzz) Campbell.



Governor Gary Locke views the DASA Client Satisfaction Survey team poster before the awards ceremony.

agencies to obtain quality improvement information about their program as well as meet one part of the Washington Administrative Code (WAC) outcome requirement. For information about the survey, please contact Felix Rodriguez, Ph.D., by phone at (360) 438-8629, or e-mail at rodrifi@dshs.wa.gov. 

By Sue Green

Safe Babies, Safe Moms

Safe Babies Safe Moms, also known as the Comprehensive Program Evaluation Project (CPEP) serves substance abusing pregnant, postpartum, and parenting women (PPW) and their children from birth-to-three at project sites in Snohomish, Whatcom, and Benton-Franklin Counties. Safe Babies Safe Moms represents a state-level consortium formed by DASA, and including the Department of Social and Health Services' Children's Administration, Economic Services Administration, Medical Assistance Administration, Research and Data Analysis, and the Department of Health. The purpose of the consortium is to respond to the disturbing number of births of alcohol- and drug-affected infants.

Safe Babies Safe Moms provides a comprehensive range of services, with a goal of stabilizing women and their young children, identifying and providing necessary interventions, and assisting women in gaining self-confidence as they transition from public assistance to self-sufficiency. These services include: specialized Targeted Intensive Case Management (TICM) that provides referral, support, and advocacy for substance abuse treatment, and continuing care; long-term residential treatment that provides a positive recovery environment with structured clinical services; and housing support services for women and children, who stay up to 18 months in a transitional house.

The following are just a few success stories from the various Safe Babies Safe Moms sites. For some women, this is the first time they have been successful and working a program of recovery.

Mary's Story

"Mary" is currently in her mid-twenties and the biological mother of six children. Her parents were poly-drug users and divorced by the time she was nine. At 16, she gave birth to her first child and later married the father of her first three children. She has since been involved in multiple relationships characterized by heavy drug use and physical abuse. She has lived in motels, a shelter, and on the streets. By the time she was pregnant with her sixth child, her other five children had been

removed from her custody and placed in foster care.

At that point, she entered an inpatient drug facility, and shortly after, enrolled in the Comprehensive Program Evaluation Project (CPEP). During treatment, she gave birth to her sixth child. When she completed drug treatment, she entered transitional housing and an outpatient drug treat-



ment/aftercare program. Three of her children have since been reunited with her. She has received multiple services including mental health counseling, medical care, childcare, parenting support, and WorkFirst employment training. She is currently studying for her GED certificate and working part-time. She has been clean and sober for 16 months.

Amy's Story

An alcoholic mother in an unstable, chaotic environment raised "Amy", who is currently 31 years old. Her mother had her first of seven children at age 14. She was 9 years old when she was first sexually molested and began using alcohol and marijuana soon after the molestation. At age 14, Amy found her mother dead on the kitchen floor. The autopsy found she had a massive heart attack, and "she had enough alcohol in her to kill eight horses."

After her mother's death, Amy went to live at a friend's house, and began a lesbian relationship with her girlfriend. She and her girlfriend continued to use drugs. At age 23, this relationship

ended. Amy moved in with a man who became very physically abusive. She was in the hospital 35 times in one year for injuries and broken bones. A relationship with a second man was not as abusive, but both drank alcohol and used other drugs. In 1998, she became pregnant by this second man.

Amy had a difficult time with withdrawal and getting accustomed to the routine for the first several days of treatment. However, she soon settled in and became enthusiastic about her opportunity for recovery. She was eager to work out childhood issues, as she began understanding how they affected her continued alcohol and other drug use.

Amy has been clean and sober almost three months. She is getting appropriate medical care, she continues in counseling, and the CD residential treatment facility has given her drug/alcohol education including the skills to enable her to stay clean and sober. Reports from the treatment center describe her as an excellent mother to her child, and she

has become a role model for her peers.

Danielle's Story

"Danielle" is 27 years old and has mental health issues undiagnosed and untreated since age six. She, too, suffered sexual, physical and emotional abuse as a child. She began smoking marijuana at age 24 because it helped with her symptoms: auditory, visual, and kinesthetic hallucinations. She had no individual mental health counseling prior to residential CD treatment.

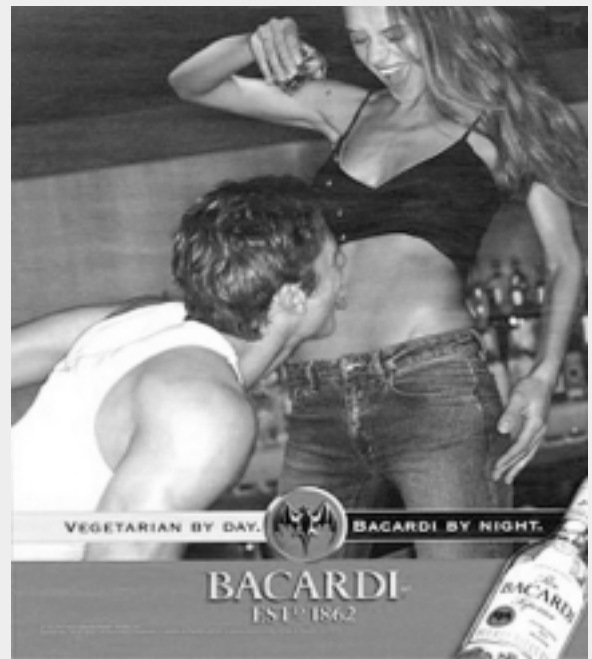
Danielle attempted outpatient treatment, but was unable to stay clean. She was referred to residential treatment, and to TICM by her outpatient counselor. Through the TICM staff she has been connected with the local mental health agency.

She is in couples counseling and, as a result of her commitment to staying clean and sober, her significant other has stopped smoking marijuana. They plan to obtain housing together after she has completed treatment. They will regain custody of her children, establishing a stable, clean and sober environment for the family.

New Report Reveals Youth See More Alcohol Ads Than Adults

The newly developed Center on Alcohol Marketing and Youth at Georgetown University has issued a report about alcohol advertising in magazines titled: *Out of Control: Alcohol Advertising Taking Aim at America's Youth*. To view this report as well as other reports, fact sheets, tips for taking action, and news about alcohol industry marketing practices, visit the center's website at www.camy.org. The website also features an interactive tool for measuring your child's exposure to alcohol ads.

The Center on Alcohol Marketing and Youth's mission is to monitor the marketing practices of the alcohol industry to focus attention and action on industry practices that jeopardize the health and safety of America's youth. The center is supported by grants from The Pew Charitable Trusts, The Robert Wood Johnson Foundation and Georgetown University.



Rolling Stone Magazine, October 2001

Chemical Dependency Professional Website Update

By Tammy Dow

In March 2001 the Alcohol Drug Help Line designed and implemented a website, to provide a free service for agencies in Washington State, to advertise employment opportunities for counselors. Funded by the Division of Alcohol and Substance Abuse (DASA) the website was developed as a tool to assist in recruiting and to eliminate the shortage in the chemical dependency (CD) counselor workforce.

Individuals seeking jobs in the field of chemical dependency in Washington can view the website to see what jobs are currently available. Individuals may also post their own resumes. Both jobs and resumes may be entered into the database after viewing easy to follow instructions. This is a totally interactive process and requires no codes or passwords from those participating. The website (www.cdpcertification.org) has completed over 18 months of continuous operation since its inception.

The use of the Website has been increasing every month as more people become aware of its existence. We are able to track the number of "sessions" and "hits" on this website. A "session" tracks users as they move around on the website, regardless of the number of pages they visit ("hit"). "Hits" are a good indication as to how interesting a user perceives the website. In the year 2001 the number of sessions and hits went from 55 sessions and 349 hits in March to 867 sessions and 6089 hits in December. For the year 2002 the numbers increased from 1243 sessions and 10101 hits in January to 1757 sessions and 10944 hits in October. We are very excited about the activity on the website. It appears to be a much used resource as it gets more exposure in the chemical dependency treatment and prevention community.

Another component of the website is the informational page covering the basics on how to be-

come a chemical dependency professional in Washington State. Educational requirements and appropriate links are available including a downloadable application for registration as a counselor with the Washington State Department of Health.

Tammy Dow is the Assistant Director of the Alcohol/Drug 24-Hour Helpline in Seattle. She may be reached by calling (206) 722-3703.

Following are some of the positive comments from individuals in the CDP/Treatment Community letting us know that the website has been very helpful:

- Roland Hunter, Treatment Supervisor for Western Clinical Health Services (WCHS) in Renton, wrote to say he finds the website helpful and has been able to contact and communicate with several potential employees. He states that he plans on using the website in the future and feels that the service has been an asset to his agency.
- Jeremy Peterson, who is employed by WCHS, says he wouldn't have his current position if it hadn't been for the CDP website.
- David Jefferson, former Program Director of SeaMar/Visions, reported the job site was a great success, and that he hired his Clinical Supervisor through the website.
- Jorja Hankins, with Stevens County Counseling Services, says that her organization filled a position they posted on the website and that they appreciate having this kind of resource for both employers and job seekers.

Pathways COD Treatment Program Opens

By Steve Brown, Regional Treatment Manager

The Pathways program opened in April of 2002 and is using best practices to change lives. Pathways is a 16-bed co-occurring disorders (COD) program in Buena, Washington that is a modified 28-day male-only program developed to treat the most severe COD individuals. It shares the facility at James Oldham Treatment Center with a 31-bed traditional intensive inpatient chemical dependency treatment program.

The Pathways program specializes in treating individuals with thought disorders, severe learning difficulties, and who may require medication modification to successfully complete treatment. They have capacity to stabilize patients onsite and put them through a chemical dependency program while educating and continuing to treat their co-occurring mental disorder.

There is a 12-Step emphasis along with significant focus on maintaining health and abstinence through working on major health-related components, such as diet, life balance, and exercise. Aftercare discharge planning begins immediately and the Pathways program assists residents in making connections in their community to maintain stability/abstinence.

Funding provided by Division of Alcohol and Substance Abuse, Mental Health Division and Greater Columbia RSN (Regional Support Network). Agreement negotiations soon begin with other RSN's to cover a portion of their patient's stay in the program - well worth it, considering completing patients show success managing their lives without further psychiatric hospitalization.

Program partners include Pathways Co-occurring Disorders Program, jointly administered by Triumph Treatment Services; Central Washington Comprehensive Mental Health, in coordination with Crisis Center Program; and Yakima Valley Memorial Hospital Behavioral Health Care Center (psychiatric inpatient unit).



DASA Training Update

By Dixie Grunenfelder

2002 Prevention Summit

The Division of Alcohol and Substance Abuse (DASA) collaborated with the Department of Health, Liquor Control Board, Office of Superintendent of Public Instruction, College Coalition for Substance Abuse Prevention, and the State Coalition to Reduce Underage Drinking to host the Washington State Prevention Summit, in Yakima, on October 24 - 26, 2002.

The Summit attracted over 1,000 speakers and participants, including 350 youth attending workshops designed to help them work on prevention programs in their home schools and communities. Participants

included law enforcement, prevention professionals and volunteers, parents, teachers, treatment providers, and policy makers.

Summit highlights included: presentations by the Deputy Director of the Office of National Drug Control Policy, national prevention researchers, local programs implementing evidence-based "Best Practices" and a town hall meeting convened by the Governor's Council on Substance Abuse. Exemplary Awards were given to Media Companies committed to the alcohol, tobacco and other drug issue, Prevention Professionals and Volunteers, and Prevention Programs demonstrating solid outcomes.

2003 Treatment Institute

The 2nd Annual DASA Treatment Institute is scheduled for July 28 - 30, 2003, at Seattle Pacific University, in Seattle. The three-day Institute is designed for chemical dependency professionals looking for professional development opportunities.

The Institute will provide intensive, skill-based instruction in the following areas: Treatment Outcomes, Stigma Issues, Behavioral Modification, Relapse Prevention, Native American Treatment Strategies, Adult Learning and Teaching Strategies, Motivational Interviewing, and Tobacco Cessation. In addition, the Institute will offer a wide variety of workshop presentations covering the current issues facing the chemical de-

pendency field, as well as the latest counseling techniques. Participants will earn up to 24 chemical dependency continuing education credits. Registration information will be mailed in Spring 2003.

2003 Regional Trainings

There are several free regional trainings scheduled for 2003. These are skill-based workshops for the staff of certified chemical dependency provider staff in each region. Specific topics vary based on the need of the region, and include: Confidentiality, Ethics, Clinical Supervision, ASAM, and the Matrix Model.

For more information on DASA training activities, call the DASA Training Section at (360) 438-8200 or 1-877-301-4557.

The White House Office of National Drug Control Policy (ONDCP) visited Seattle as part of a fact-finding tour of 25 cities. Director John Waters met with Lt. Governor Brad Owen, college presidents from across the state, and spoke at the United States Department of Education's Annual Conference for Substance Abuse Prevention in Higher Education. The themes of his presentation included implementing science-based programs and developing earlier interventions.

Deputy Director Andrea Barthwell, M.D., ONDCP's lead for Demand Reduction, requested a series of briefings regarding Washington's treatment and prevention systems. Fred Garcia, the Division of Alcohol and Substance Abuse's (DASA) Chief of Program Services, convened seven briefings to inform Dr. Barthwell of how our systems function, as well as some of the issues and problems affecting our services.

The first briefing provided an overview of DASA's programs. Prevention and treatment providers, county coordinators, and researchers presented their view of services. These representatives discussed our infrastructure, which is based on data-driven policies and practice. Dr. Barthwell was impressed to hear that collaboration to leverage multi-systems' resources is the standard practice in our state.

The second briefing was with researchers. We discussed the "Bridging the Gap" workgroup, the state's standing research committee, and successes we have had using research findings to help shape Public Policy. For example, the Supplemental Security Income (SSI) cost offset report brings additional resources to chemical dependency treatment because we were able to clearly show that this treatment earns significant cost-savings in medical and psychiatric Medicaid bills.

The next briefing brought coalitions to the table. Dr. Barthwell heard from community partnerships, reducing underage access to alcohol task forces, methamphetamine coalitions, and community networks. Again, the main message was that coalitions represent Washington's way of doing business. This is the norm, not the exception. The State Incentive Grant was discussed, and Dr. Barthwell recognized Washington as a national leader.

The fourth group to meet with Deputy Director Barthwell consisted of a superior court judge, a county prosecutor, drug court administrators, the defense bar representative, members of the American Civil Liberties Union, and others. She learned that

Office of National Drug Control Policy Visits Seattle

By Fred Garcia



this group came together to push for sentencing reform with cost savings from the reduced need for more prison beds earmarked for treatment. Again, Dr. Barthwell heard of collaboratives driving our field.

The next briefing highlighted school-based prevention and intervention services. Federal funding for safe and drug-free schools was discussed, and a concern voiced that there continues to be an erosion of the core mission – substance abuse prevention/intervention. On a positive note, we discussed the common state agency needs assessment. This briefing also brought the anticipated Prevention Management Information System forward for discussion.

The sixth briefing was with several of Washington's methadone providers. The discussion centered on issues related to siting, physician-based diagnosing, and the benefits and barriers of buphenorphine.

The final briefing was with members of the college coalition. This group reviewed its activities, lessons learned, and challenges. Dr. Barthwell recognized Western Washington University for the work in social norming – cutting edge research to practice.

After a full day, Dr. Barthwell had a picture of the breadth and depth of the demand reduction activities in Washington State. She appreciated all the leaders who came forward to share their perspectives of data-driven policy recommendations, research, and collaborations.

In addition to listening, Dr. Barthwell shared some directions her office will be exploring. ONDCP is considering an initiative toward earlier interventions with people abusing drugs or alcohol. She specifically mentioned the work of Dr. William Miller from University of New Mexico: Brief Early Intervention. The ONDCP goal is to reduce drug use by ten percent in five years and 25 percent in ten years. ONDCP believes that the only way to reduce these numbers is greater emphasis on early interventions, and not wait until the person is clinically diagnosed as chemically dependent.

Many thanks to Earl Long, Michael Langer, Steve Smothers, Christine Hoffman, Linda Becker, Tom Pennella, and Annabeth Goldrick for all their efforts to organize these briefings.

[On a personal note, Dr. Barthwell holds this office within the Bush Administration that I held during the first term of the Clinton Administration. It was fun to catch up on the office, and to learn how my former colleagues are doing. It was a tiring day and a half, but it was time well spent.]

National Mentoring Month

By Thomas Pennella

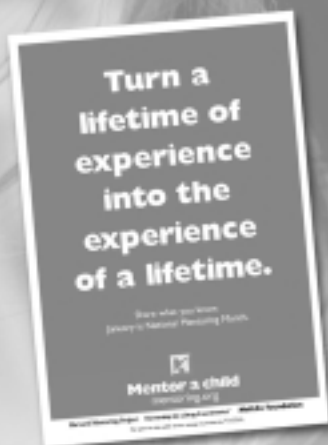
Research has repeatedly shown that introducing a mentor into a youth's life can have a powerful impact on preventing drug abuse and youth violence, while greatly enhancing their ability to lead a fulfilling and productive life. For some children, having a caring adult mentor to turn to for guidance and encouragement can make the crucial difference between success and failure in life. In the United States today, 17.6 million youngsters — nearly half the youth population — want or need mentors to help them reach their full potential. Studies and experience confirm that quality mentoring works.

In her book, *Stand by Me: The Risks and Rewards of Mentoring Today's Youth*, Dr. Jean Rhodes, of the University of Massachusetts, concludes that mentors can influence young people in three important ways, by:

- Enhancing social skills and emotional well-being;
- Improving cognitive skills through dialogue and listening; and
- Serving as a role model and advocate.

Yet, despite the great need for mentors, and the expansion of quality mentoring efforts, just 2.5 million youngsters are in formal mentoring relationships - which means 15 million still need mentors. National Mentoring Month works to help close this "mentoring gap" by institutionalizing our nation's commitment to mentoring.

National Mentoring Month was established through a combination of White House and Congressional involvement, national and local media, and extensive community out-



reach. National Mentoring Month will raise awareness of the various forms of mentoring, including increasing workplace mentoring where young people are provided opportunities to visit job sites and explore careers.

The goals of National Mentoring Month are to:

- Raise awareness of mentoring in its various forms;
- Recruit individuals to mentor, especially in programs that have a waiting list of young people; and
- Promote the rapid growth of mentoring by recruiting organizations to engage their constituents in mentoring.

In support of these goals, a comprehensive public awareness and

Top Hollywood stars, political leaders, athletes, and journalists — including Martin Sheen, Senators Ted Kennedy and John McCain, Secretary of State Colin Powell, Bill Russell, Tom Brokaw, Tim Russert, Mike Wallace, and Oprah Winfrey — are participating in this national public service campaign to recruit volunteer mentors for young people who are at risk of not achieving their full potential.

advertising campaign that includes print ads, radio spots, and television public service announcements has been developed. They invite individuals to become mentors and encourage organizations to start mentoring initiatives or expand existing programs.


Locally, the Department of Social and Health Services, Division of Alcohol and Substance Abuse (DASA), in conjunction with the Washington State Mentoring Partnership, United Way of King County, and Big Brothers Big Sisters have several activities planned to support

National Mentoring Month.

There will be a Public Service announcements advertising the need for more mentors and a 1-800 number to call to reach mentoring organizations across the state. Governor Locke, as well as Super Sonic Desmon Mason, have recorded a public service announcement that will follow commercials.

The Governor signed a proclamation declaring January as Mentoring Month.

- A Super Sonic Mentoring Night will take place January 12, 2003, at Key Arena. Mentors and mentees will attend a pre-game session to meet several Sonic players and Storm players. The players will share their experiences concerning mentoring.
- "Be the One" Mentoring Fair, sponsored by Thurston County Health Department.
- Vancouver County — Community Fair, including a mentoring gallery. Lt. Governor Brad Owen will be attending.

Celebrate National Mentoring Month 2003! Find out more at www.WhoMentoredYou.org. 

Dior Addict Prompts Protest

By Neil Scott

Is it cool to be an addict? Apparently Christian Dior thinks so. They are willing to bet millions on a successful new campaign to convince young, impressionable girls to wear the scent of sensuality: Christian Dior Addict.

A quick visit to their website (www.addict.com) will take you through a variety of pulsating images with words like "sensuality," "energy," and "pleasure," to describe their new product, asking the ultimate question "will you admit it?" The invitation to get hooked on Dior's new fragrance is a disturbing attempt to glamorize addiction.

National, state, and local organizations – coordinated by www.facesandvoicesofrecovery.org – are joining in a nationwide protest, urging people in recovery, their friends, and family members to

write to Dior and express their opinions.

Congressman Jim Ramstad (R-Minn) is furious. "As a recovering alcoholic and member of Congress, I'm outraged that Christian Dior is marketing addiction to young people. Dior's massive ad campaign is the ultimate in corporate irresponsibility and shows complete disregard for families who have lost a child to addiction."

Stacia Murphy, President of the National Council on Alcoholism and Drug

Dependence (NCADD) was adamant in her opposition to the campaign. "Unfortunately, in one ill-conceived effort to be hip, sexy, and cool—and sell product—the Dior Campaign has made our job more difficult. Addicts—the real ones—do not always smell terrific, and those who have recovered have done so through hard work and difficult emotional and

spiritual growth. Sadly, a perfume named 'Addict' can only cheapen their hard work and further contribute to the stigma of addiction."

Dior's parent company, Louis Vuitton Moët Hennessy (LVMH), headquartered in Paris, France is no stranger to the alcohol field. Their product line includes such notable alcoholic beverages as Dom Perigon, Hennessy Cognac, and numerous premium wines. Neither Dior nor LVMH would comment on the controversial campaign.

The Alliance for Recovery, a state-wide grassroots organization made up of people in recovery, their friends, family members and allies is urging individuals in Washington State to add their voice to the protest.

Letters should be sent directly to:

Veronica Post,

Consumer Affairs
DIOR
19 E. 57th Street
New York, NY 10022
212-931-2200

veronica_post@dior.com

Bernard Arnault, CEO
LVMH
30, Anenue Hoche
75008 Paris, France
Arnault@LVMH.com

Neil Scott is the Executive Director of Alliance for Recovery. He may be reached at neilscottseattle@attbi.com.

CHRISTIAN DIOR UPDATE!

Advocacy Works! Following a meeting with NCADD, Faces and Voices of Recovery, and Momstell, Christian Dior's president agreed to make some changes to the campaign, although more changes are needed. View the letter at www.efavor.org/Dior%20letter.pdf.



Asian Kids Society



Children show one of the cultural activities they learned in Asian Kids Society, a drug prevention program funded by Public Health of Seattle and King County and DASA.

Got FOCUS?



To continue bringing you useful information in FOCUS, let us know what matters most to you, and the drug prevention and recovery news and successes happening in your community. Send your comments and information to Deb Schnellman at schneda@dshs.wa.gov.

Yakama and Lummi Tribe Youth Featured in National Anti-Drug Campaign

Campaign American Indian, in collaboration with American Indian public health experts, have recently unveiled a series of drug-prevention advertisements targeting American Indian audiences. Two of the new ads feature Washington youth from tribes in Washington State. Hilary Hillaire, age 12, with the Lummi Tribe, is shown demonstrating her anti-drug, which is drumming. Monty Meninick, age 12, with the Yakama Tribe, demonstrates his anti-drug, which is dancing.

Other posters in the series focus on the positive influence of parents and elders in the American Indian community and the critical role they play in drug prevention. Dr. Timothy Taylor, member of the Kiowa Tribe, American Indian Public Health Expert and Senior Research Scientist at the University of New Mexico, noted that "much of our research demonstrated that general media portray American Indians in a simplistic, often negative, and critical light. The new anti-drug advertisements are more culturally balanced, depicting communities and families in ways that empower rather than isolate them."

DASA will be printing copies of the new posters and distributing them statewide via the Alcohol/Drug Prevention Clearinghouse in late winter/early spring. To view the series of Native American posters, go to www.mediacampaign.org and click on "ad gallery – print ads." For more information contact Deb Schnellman, DASA's Communications Manager, at (360) 438-8799, or e-mail at schneda@dshs.wa.gov.





Tobacco News in Washington is Back Online

News about the Department of Health's tobacco program, tobacco prevention resources, and local tobacco prevention and control activities is now available online at http://www.doh.wa.gov/tobacco/contractors/newsletters/2002_12.pdf. The December issue of the newsletter reports that between 1999 and June 2002 there were 82,000 fewer adult tobacco users. That's enough people to equal a city the size of Everett.

To submit tobacco related news, contact Susan Zemek at susan.zemek@doh.wa.gov.

CAC/County Administrative Board Summit A Great Success

By Tommy R. Thomson (CAC Member)

The first annual Citizens Advisory Council (CAC)/County Administrative Board Summit was held at the Hilton Conference Center, SeaTac on December 6, 2002. The objective of the summit was to review the legal authorities and duties of each and to establish links for future communication between the two. It was a true peer-to-peer conference between the volunteer member citizens on local and statewide issues.

Topics discussed and presentations made included the following:

- The Revised Code of Washington's (RCW) and ordinances governing the CAC and County Administrative Boards.
- What the CAC does.
- A discussion session with the chairs of the King and Snohomish County Administrative Boards sharing how they operate. This included the King County Coordinator relating how he develops the partnership between board and staff and the interaction between them.
- The Division of Alcohol and Substance Abuse (DASA) Director, Ken Stark, presented current issues on budget, treatment, prevention, opiate substitution, and sentencing reform.

The summit concluded with a discussion on next steps for future communication and coordination between the CAC, County Administrative Boards, and Tribes.

Future meetings will follow this first annual summit. There was consensus that two or three such joint meetings each year would help the CAC in learning about local issues and the County Administrative Boards in learning about statewide issues. Those present felt that this activity would help them do their jobs as citizen board members more effectively and be better informed.

The members of the CAC look forward to coordinating future meetings. Any comments or questions on this activity and its future plans can be forwarded to Tommy Thomson, CAC Member, at (360) 734-1310, e-mail at trtcpa@earthlink.net or Doug Allen at DASA, (360) 438-8060 or e-mail at allende@dshs.wa.gov.

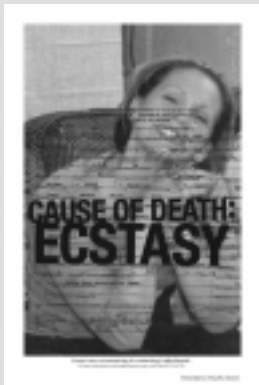
Youth Gain Life Skills Through Soccer

By Harvey Funai, DASA and Brad Kimura, Sounders Soccer Success Fund

Department of Social and Health Services-Division of Alcohol and Substance Abuse and the King County Sheriff's Department are co-sponsors with the Sounders Soccer Success Fund (SSSF). The White Center youth program teams have just completed their first full year, with coaching provided by professional soccer players with the Seattle Sounders. The boys and girls teams are members of the Washington Youth Soccer Association and the West Highline Soccer Club. The SSSF is expanding to one more boy's team starting January 2003. The boys will be under 12 years of age. The SSSF program is dedicated to teaching youth soccer skills and most importantly, the assets needed to achieve and strive in today's society. The program not only offers youth instruction and guidance in basic soccer skills, but also provides them with invaluable life skills. Participants are coached on issues such as the risks of alcohol, tobacco, and other drug use, the importance of a sound education, health and fitness, team play, and civic and community service.



King County Receives Grant for Ecstasy Prevention



Public Health of Seattle and King County recently received a federal grant for \$336,643 to support infrastructure development and interventions to prevent the use of Ecstasy and other club drugs, methamphetamine, and inhalants.

A total of \$8.8 million was awarded to 13 organizations across the country. The grants are part of the prevention programs of the Substance Abuse and Mental Health Services Administration (SAMHSA).

New Marijuana Prevention Resources

Marijuana is the most widely used illicit drug among America's youth. Twice as many eighth graders today have tried marijuana compared to a decade ago. Youth are treated for addiction to marijuana more often than for all other illicit drugs combined. Many kids – and their parents – continue to see marijuana as benign.

To dispel myths and misconceptions about the drug, the Office of National Drug Control Policy has launched a comprehensive marijuana prevention initiative. It is aimed at youth, parents, and other influential adults. Resources include fact sheets, brochures, materials for outreach to news media, and public service announcements. All materials are available online at www.mediacampaign.org.

Overview and Outcomes of 2002 Drug Related State Ballots

The Center for Substance Abuse Research has compiled a list of state ballot measures during 2002 in Arizona, Nevada, Washington DC, Ohio, Florida, and Missouri. The list is available online at <http://www.cesar.umd.edu/cesar/cesarfax.asp>.

Faces of Prevention Kit Now Available

The Center for Substance Abuse Prevention (CSAP) and National Prevention Network (NPN) Prevention Works! communications training package, the "Faces of Prevention" Resource Kit, has been completed and is available online. The new kit represents collaborative efforts between CSAP's Division of Prevention Education & Dissemination, the NPN Public Information and Media Committee, and several individual NPN members and their colleagues.

A DASA-funded prevention program in Spokane, *Hope for Children of Addicted Parents*, is one of the prevention testimonials appearing in the kit. The kit also contains cost benefit estimates from prevention research.

The materials are available to view, download, or print from the CSAP Prevention Decision Support (DSS) website, at <http://preventiondss.samhsa.gov>.

To locate the new "Faces of Prevention" Resource Kit in the DSS website from the homepage:

1. Click on the "Get Training and Support" Tab at the upper right of the screen.
2. Click on "Links to More Resources to Get Training & Support."
3. Click on the category "Training Materials from CSAP/NPN Prevention Works!"
4. The link for "Prevention Works! The Faces of Prevention Resource Kit" will appear under this category.



Hospital Admissions Significantly Higher for Opiate Substitution Treatment Clients When Not in Treatment

By Toni Krupski

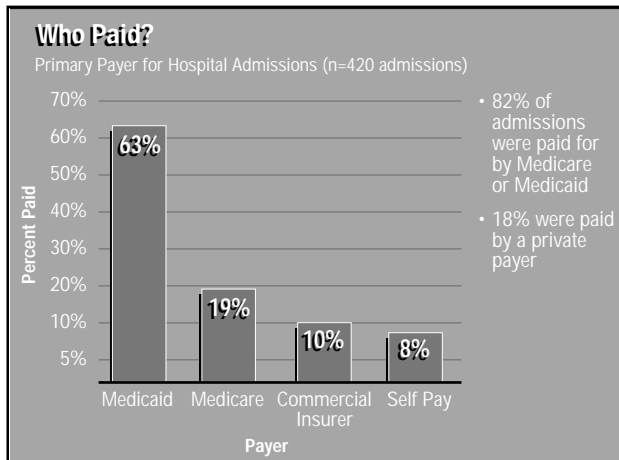
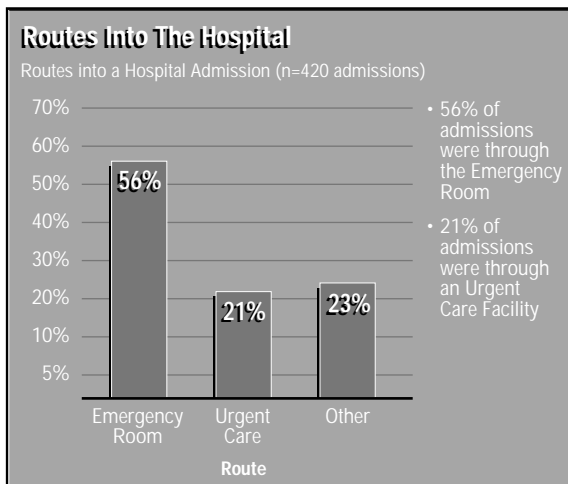
A recent study conducted for the Division of Alcohol and Substance Abuse (DASA) reported that publicly funded opiate substitution treatment clients significantly were more likely to be admitted to a hospital while they were out of treatment as compared to when they were in treatment. In fact, there was a 33% reduction in the odds of hospital admissions for clients who were in treatment.

The most frequent reason for these hospital admissions was complications of pregnancy, about 23% of all admissions. This finding suggests that retention in treatment may result in important health benefits for pregnant methadone clients and their children. Other reasons for hospital admissions included mental disorders (about 21% of all admissions), diseases of the skin (11%), and diseases of the respiratory system (10%).

Most of the hospital admissions came through either the emergency room (56% of admissions) or through an urgent care facility (21% of admissions). Such acute care services are among the most costly. Thus, a question of particular interest was, who paid for these hospital stays? The answer was that Medicaid or Medicare paid 82% of hospital admissions; a private payer paid only 18%. These results argue, again, for the importance of treatment retention - this time for the role it plays in the reduction of hospitalizations, and thus, overall medical costs.

This study was based on all clients admitted to opiate substitution treatment in 1995 (1,109 persons). Clients were tracked for one year after admission through the Washington State Department of Health hospital admissions database. Nearly 32% of these clients stayed in treatment for the entire year, about 60% stayed in treatment for six months or longer. About 84% of clients were under 45 years of age. Close to 50% were male, 50% female. About 20% were married.

Bill Luchansky, Ph.D., from Northwest Crime and Social Research (based in Olympia, WA) conducted a study in collaboration with Dario Longhi, Ph.D., and Lijian He, Ph.D., both from the Department of Social and Health Services Division of Research and Data Analysis. The study was funded by the Washington State Treatment Outcomes and Performance Pilot Studies Enhancement (TOPPS II) grant from the Center for Substance Abuse Treatment. Copies of the report can be obtained from the Washington State Alcohol/Drug Clearinghouse at 1-800-662-9111 (within Washington State) or 206-725-9696 (within Seattle or outside of Washington State), by e-mail at clearinghouse@adhl.org, or by writing them at 3700 Rainier Avenue South, Suite A, Seattle, Washington 98144.



Upcoming Drug Education and Awareness Events: February – April



FEBRUARY '02

MARCH CONTINUED

- 9-15 NATIONAL CHILDREN OF ALCOHOLICS WEEK
— Contact: National Association for Children of Alcoholics (888) 554-2627
Website: www.nacoa.org
- 14 Manana Coalition Statewide Latino Youth Conference at Seattle Center. Contact: Laura Timme, ltimme@msn.com or (206) 461-4880 x168
- 11-14 CADCA's National Leadership Forum XIII in Washington, DC. Community Anti-Drug Coalitions of America, website: www.cadca.org

- 2-8 National Collegiate Health and Wellness Week www.bacchusgamma.org/
- 10-12 OSPI Spring Collaboration Institute at Shilo Inn, Ocean Shores. Contact April Wright, (360) 725-6049 or awright@ospi.wednet.edu.
- 16-22 NATIONAL INHALANTS AND POISONS AWARENESS WEEK — Contact: National Inhalant Prevention Coalition (800) 269-4237 or www.inhalants.org



APRIL '03

DRUG FREE WASHINGTON MONTH: "Do Amazing Things, Not Drugs." Theme Contest Winner: Chester Bates, 4th grade student at Carson Elementary in Stevenson. Contact: Washington State Alcohol/Drug Clearinghouse (800) 662-9111. Website: <http://clearinghouse.adhl.org>

ALCOHOL AWARENESS MONTH: Alcohol awareness kit available from National Council on Alcoholism and Drug Dependence: (800) 622-2255 or www.ncadd.org/programs/awareness

APRIL CONTINUED

CHILD ABUSE PREVENTION MONTH: Substance abuse is a leading cause of child neglect and abuse. Information and resources for preventing and reporting child and adult abuse are available from the DSHS Endharm Campaign at www.wa.gov/dshs/geninfo/endharm.html or www.preventchildabuse.org

- 2 KICK BUTTS DAY - Campaign For Tobacco Free Kids — Contact: National Center for Tobacco Free Kids (800) 284-KIDS Website: www.tobaccofreekids.org and www.kickbuttsday.org
- 10 NATIONAL ALCOHOL SCREENING DAY Alcohol treatment organizations across the country will provide educational presentations, a written screening questionnaire, an opportunity for participants to meet with a health professional, and referrals to treatment. For assistance with sponsoring an event, contact: National Mental Illness Screening Project, (781) 239-0071 or <http://www.mentalhealthscreening.org/alcohol.htm>
- 20-25 28th Annual Northwest Indian Youth Conference Doubletree Hotel, SeaTac. Contact: Adrian Verzola, (206) 324-4315 or iwasil@yahoo.com.



MARCH '02

- 1-29 BACCHUS and GAMMA SAFE SPRING BREAK — Contact: BACCHUS & GAMMA PEER EDUCATION NETWORK (303) 871-0901
Website: www.bacchusgamma.org/

For more information or to register
for trainings, contact DASA's
Training Section at 1-877-301-4557

Want to share FOCUS with others? Let them know it's
on DASA's website at www1.dshs.wa.gov/dasa
(click on "What's New")



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